

SECOND REGULAR SESSION

# HOUSE BILL NO. 1931

## 96TH GENERAL ASSEMBLY

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INTRODUCED BY REPRESENTATIVES HOLSMAN (Sponsor), OXFORD, HUMMEL, NEWMAN,  
TALBOY, SIFTON, RIZZO, ELLINGTON, MORGAN AND HUGHES (Co-sponsors).

6134L.011

D. ADAM CRUMBLISS, Chief Clerk

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### AN ACT

To amend chapter 208, RSMo, by adding thereto one new section relating to the KidCare Co-op program.

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*Be it enacted by the General Assembly of the state of Missouri, as follows:*

Section A. Chapter 208, RSMo, is amended by adding thereto one new section, to be  
2 known as section 208.665, to read as follows:

**208.665. 1. Subject to appropriations, there is hereby established the "KidCare Co-**  
2 **op Program" within the department of social services to provide affordable health**  
3 **insurance coverage for all children up to nineteen years of age who are residents of this**  
4 **state. The KidCare Co-op shall be a public option nonprofit health insurance cooperative.**

5 **2. There shall be no income limits regarding eligibility for coverage under the**  
6 **program. The department may operate the KidCare Co-op program in conjunction with**  
7 **the state children's health insurance program (SCHIP) by screening and offering coverage**  
8 **to children who are not eligible for coverage under the SCHIP program established under**  
9 **sections 208.631 to 208.657.**

10 **3. Under the KidCare Co-op program, parents or guardians of children may**  
11 **purchase health insurance coverage for their children through the health insurance**  
12 **cooperative. The following premiums and co-payments shall apply under the program:**

- 13 **(1) The monthly premium for each child shall be twenty-five dollars;**  
14 **(2) General office visits shall have a fifteen dollar co-payment;**  
15 **(3) Urgent care visits shall have a thirty-five dollar co-payment;**  
16 **(4) Emergency room visits shall have a fifty dollar co-payment.**

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

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18 **In addition, coverage amounts and maximums shall be based on rules promulgated by the**  
19 **department.**

20 **4. The department shall establish by rule the criteria for health carriers and health**  
21 **benefit plans to participate in the health insurance cooperative for the program.**

22 **5. Any rule or portion of a rule, as that term is defined in section 536.010, that is**  
23 **created under the authority delegated in this section shall become effective only if it**  
24 **complies with and is subject to all of the provisions of chapter 536 and, if applicable,**  
25 **section 536.028. This section and chapter 536 are nonseverable and if any of the powers**  
26 **vested with the general assembly pursuant to chapter 536 to review, to delay the effective**  
27 **date, or to disapprove and annul a rule are subsequently held unconstitutional, then the**  
28 **grant of rulemaking authority and any rule proposed or adopted after August 28, 2012,**  
29 **shall be invalid and void.**

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